**APPLICATION FOR EMPLOYMENT**

We are an Equal Opportunity Employer. We are dedicated to a policy of non-discrimination in employment on any basis including race, color, creed, national origin, age, sex, religion, or physical disability.

**Please Type or Print**

**PERSONAL**

|  |  |  |
| --- | --- | --- |
|       |       |       |
| Position Applied For | Salary Desired | Date |
|       |       |       |       |
| Name (Last) | (First) | (Middle) | Social Security Number |
|       |       |
| Street Address | Telephone |
|       |       |       |
| City | State | Zip Code |

***Previous Address During the Last Five Years***

|  |  |  |  |
| --- | --- | --- | --- |
|       |       |       |       |
| Street Address | City | State | Zip Code |
|       |       |       |       |
| Street Address | City | State | Zip Code |

**OTHER EMPLOYMENT RELATED INFORMATION**

|  |  |  |
| --- | --- | --- |
| Person to Contact in case of an emergency: |       |       |
|  | Name | Telephone |
| List any relatives or friends working for NEI: |       |
|  | Names(s) |

|  |  |  |
| --- | --- | --- |
| Were you previously employed by this organization? | [ ] No | [ ] Yes |
| If yes, date(s) employed: |       |
|  |  |  |
| Have you ever been convicted of a crime during the last 10 years? | [ ] No | [ ] Yes |
| If yes, explain: |       |
|  |  |  |
| Can you submit a birth certificate or other proof of U.S. citizenship? | [ ] No | [ ] Yes |
|  |  |  |
| If not a U.S. citizen, can you submit verification of your legal right to work permanently in the U.S.? | [ ] No | [ ] Yes |

**EXPERIENCE List previous work experience beginning with current or most recent:**

|  |  |
| --- | --- |
|       |       |
| Name of Employer | Type of Business |
|       |       |
| Street Address | Telephone |
|       |       |
| City | Dates Employed (from-to) |
|       |       |       |
| Title | Salary | FT/PT |
|       |       |
| Name and Title of Supervisor | May we Contact? |
|       |       |
| Reason for Leaving? | Brief Description of Duties |

|  |  |
| --- | --- |
|       |       |
| Name of Employer | Type of Business |
|       |       |
| Street Address | Telephone |
|       |       |
| City | Dates Employed (from-to) |
|       |       |       |
| Title | Salary | FT/PT |
|       |       |
| Name and Title of Supervisor | May we Contact? |
|       |       |
| Reason for Leaving? | Brief Description of Duties |

|  |  |
| --- | --- |
|       |       |
| Name of Employer | Type of Business |
|       |       |
| Street Address | Telephone |
|       |       |
| City | Dates Employed (from-to) |
|       |       |       |
| Title | Salary | FT/PT |
|       |       |
| Name and Title of Supervisor | May we Contact? |
|       |       |
| Reason for Leaving? | Brief Description of Duties |

|  |  |
| --- | --- |
|       |       |
| Name of Employer | Type of Business |
|       |       |
| Street Address | Telephone |
|       |       |
| City | Dates Employed (from-to) |
|       |       |       |
| Title | Salary | FT/PT |
|       |       |
| Name and Title of Supervisor | May we Contact? |
|       |       |
| Reason for Leaving? | Brief Description of Duties |

**Education and Training**

|  |  |  |
| --- | --- | --- |
|       | Graduated: [ ] Yes | [ ] No |
| High School |  |  |
|       |
| Complete Address |

|  |  |  |
| --- | --- | --- |
|       |       |       |
| College or University | Major | Degree/Year |
|       |
| Complete Address |

|  |  |  |
| --- | --- | --- |
|       |       |       |
| College or University | Major | Degree/Year |
|       |
| Complete Address |

|  |  |  |  |
| --- | --- | --- | --- |
|       |       |       |       |
| Trade or Apprentice School | Subject(s) | Completed? | Year |
|       |
| Complete Address |

|  |  |
| --- | --- |
| List any other education, training, special skills or certifications/licenses that you possess related to this job: |       |

|  |  |
| --- | --- |
| List any machines or equipment that you are qualified and experienced at operating: |       |

|  |  |  |  |
| --- | --- | --- | --- |
| List any languages that you fluently: | Speak | Read | Write |
|       |       |       |
|  |       |       |       |

**References**

List three business references:

|  |  |
| --- | --- |
|       |       |
| Name | Title |
|       |       |       |
| Company | Phone | Years Known |

|  |  |
| --- | --- |
|       |       |
| Name | Title |
|       |       |       |
| Company | Phone | Years Known |

|  |  |
| --- | --- |
|       |       |
| Name | Title |
|       |       |       |
| Company | Phone | Years Known |

**COMMENTS**

List any comments or qualifying statements you care to make:

|  |  |
| --- | --- |
| If your application is accepted, when can you start? |  |

**APPLICANT'S CERTIFICATION**

**Please read carefully before signing. If you have any questions regarding the following statements, please ask for assistance.**

**I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that any false information contained in the application may result in my discharge at any time.**

**I authorize you to communicate with all my former employers, school officials and persons named as references or former employers. I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.**

**I understand that as NEI deems necessary, I may be required to work overtime hours outside a normally defined work day or work week.**

**In consideration of my employment, I agree to conform to the policies and procedures of NEI and accept that my employment and compensation can be terminated, with or without cause, at any time, at the option of NEI or myself. I understand that no representative of NEI other than the Chairman of the Board of Directors or the President has any authority to enter into any agreement for employment for any specified period of time or to make arrangements contrary to the foregoing. Such agreement or agreements, if so made, must be in writing and signed by the Chairman of the Board of Directors or the President.**

|  |  |
| --- | --- |
|  |  |
| **Signature** | **Date** |

**FOR OFFICE USE ONLY**

***References***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
| ***Name*** | ***Position*** | ***Date*** | ***How Contacted*** | ***Result*** | ***By*** |
|  |  |  |  |  |  |
| ***Name*** | ***Position*** | ***Date*** | ***How Contacted*** | ***Result*** | ***By*** |
|  |  |  |  |  |  |
| ***Name*** | ***Position*** | ***Date*** | ***How Contacted*** | ***Result*** | ***By*** |

***Tests Administered***

|  |  |  |  |
| --- | --- | --- | --- |
| Type(s) |  | By: |  |

***Comments or Remarks:***

|  |  |  |  |
| --- | --- | --- | --- |
| ***Approved for employment:*** | ***[ ]  Yes*** ***[ ]  No*** | ***Starting Date:*** |  |
| ***Salary per annum:*** |  | ***Annual Salary Review:*** |  |